



- ☐ **Eric Nicholson Civil Service Employee Award Application OR**  
☐ **Civil Service Educational Assistance Award for Employee Spouse & Dependent Children**
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Applicants may only win once within an academic year and six times in total.  
Winners are chosen by a live lottery during a Civil Service meeting.  
If any part of the application is incomplete, the applicant may be disqualified.

**The awards will be distributed in the following ways:**

APPLICANT	AWARD	PROCESS
GSU employee taking classes at GSU	\$500	Through employee's payroll
GSU employee taking classes at a different institution (not GSU)	\$500	Through employee's payroll
GSU employee's dependent/spouse taking classes at GSU	\$500	Through GSU's Financial Aid office
GSU employee's dependent/spouse taking classes at a different institution (not GSU)	\$500	Through the corresponding institution's Financial Aid office

Student's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Attending Institution \_\_\_\_\_

Institution address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

☐ Undergraduate    ☐ Graduate

☐ FA    ☐ SP    ☐ SU

☐ Full Time    ☐ Part Time    \_\_\_\_\_ Current GPA

(must be enrolled in at least six credit hours)    (must be 2.0 for undergraduate and 3.0 for graduate)

Please briefly describe your educational and career goals:

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- ☐ Most recent transcript (unofficial is acceptable)
- ☐ Current registration/course schedule for upcoming classes
- ☐ If you are applying as a spouse or dependent, include the following information:

GSU Employee's Name \_\_\_\_\_

GSU ID number \_\_\_\_\_

**Certification:**

- ☐ I hereby authorize GSU to verify my registration/admission status with the above University.
- ☐ I hereby certify that, to the best of my knowledge, the provided information is true and accurate.
- ☐ I hereby certify that I have not won this award more than six times.
- ☐ I hereby certify that I have not won this award within this academic year.
- ☐ For dependent/spouse only: I hereby certify that I am a dependent or spouse of the GSU employee listed above.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Return applications and required documents to: **HR@govst.edu** with the subject line: Civil Service Educational Award Application

Application Submission due by: \_\_\_\_\_

Please direct questions to **civilservice@govst.edu** with the subject line: **Civil Service Educational Award Application**

**OFFICE USE ONLY:**

- ☐ Transcript
- ☐ Current Registration/Course Schedule
- Employment Verification ☐ Yes ☐ No
- Confirmed full time ☐ Yes ☐ No
- Confirmed greater than 2 years employment ☐ Yes ☐ No
- Confirmed dependent/spouse listed on GSU employee record ☐ Yes ☐ No ☐ Uncertain

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Award Result ☐ Yes ☐ No

Contacted by: \_\_\_\_\_ Date: \_\_\_\_\_